PTO/SB/22 (04-07)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional)					
			61368-222670					
			Tiled A.					
Application Number	10/644,935-Conf.	Filed Au	ugust 21, 2003					
For METHODS OF IMPROVING THE SAFETY OF ZONISASMIDE THERAPY								
Art Unit 1616			Examiner	A. Soroush				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension	and fee are as follows (che	ck time period desir	ed and enter the app	propriate fee below):				
		<u>Fee</u>	Small Entity Fee					
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120.00				
Two months	(37 CFR 1.17(a)(2))	\$450	\$225	\$				
Three month	Three months (37 CFR 1.17(a)(3))			\$				
Four months	(37 CFR 1.17(a)(4))	\$1590	\$795	\$				
Five months	(37 CFR 1.17(a)(5))	\$2160	\$1080	\$				
Applicant claims small entity status. See 37 CFR 1.27.								
A check in the amount of the fee is enclosed.								
Payment by credit card. Form PTO-2038 is attached.								
			polication to a Depos	sit Account.				
The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0261 . I have enclosed a duplicate copy of this sheet.								
I am the applicant/inventor.								
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
X att	orney or agent of record. R	• •	•					
ANTO att	orney or agent under 37 CF	R 1.34.						
Registration number if acting under 37 CFR 1.34				<u>.</u>				
			May ¹	14. 2007				
	Signature	Date						
Thomas G. Wiseman for Ed Grieff			(202) 344-4000					
Typed or printed name Telephone Number								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total of	1 forms are subn	nitted.						

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PTO/SB/17 (05-07) 05/31/2007. OMB 0651-0032 PPARTMENT OF COMMERCE

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PTO/SB/17 (05-07)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Supresuant to the Consolidated Account it.

FEE TRANSMITTAL FOR FY 2007 Application Number: A	y	Complete if Known											
FOR FY 2007 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00 Attorney Docket No. 61368-222670 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Venable LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below X Charge any additional fee(s) or underpayments of fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or underpayments of fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or underpayments of fee(s) indicated below, except for the filling fee X Charge fee(s) indicated below X Charge fee(s) indicated below, except for the filling fee X Charge fee(s) indicated below, exce													
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Application Type Fee (s) Filling Fees (s) Fee							rg						
METHOD OF PAYMENT (check all that apply)		Examiner Name A. Soroush											
METHOD OF PAYMENT (check all that apply) Check					Art Unit 1								
Check Credit Card Money Order Opposit Account Deposit Account Deposit Account None Other (please identify): X Deposit Account Deposit Account Number 22-0261 Deposit Account Name: Venable LLP	TOTAL AMOUNT	OF PAYMENT	(\$) 120.00	Attorney Docket No. 61368-222670									
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below	Check Credit Card Money Order None Other (please identify):												
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Signeture Sign	Reissue	300	150 500	250	600	300							
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge); 1251 Extension for response within first month 120.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 35,046 Telephone (202) 344-4000	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
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Signature Registration No. (Attorney/Agent) 35,046 Telephone (202) 344-4000	Other (e.g., late filing surchasge): 1251 Extension for response within first month 120.00												
(Attorney/Agent) 35,046 Telephone (202) 344-4000	SUBMITTED BY												
	Signature	J JVP			35,046	Telephone	(202) 344	-4000					
	Name (Print/Type) Th	omas Ø. Wisema	an for Ed Grieff			Date	May 14,	2007					